

APR 14 2016 10:15

Who is submitting this request?

Aggregator

Aggregator Batch Number

KN0315

Aggregator name

Knollwood Energy

Aggregator Email

linda@knollwoodenergy.com

Other Aggregator name

Other aggregator email address

Facility Owner Name

Tim Meeh

Owner Prefix

Mr.

Facility Owner email

t-jm@comcast.net

Owner Phone

603-783-4712

Facility Address

341 Shaker Rd

Facility Town/City

Canterbury

Facility State

NH

Facility Zip

03224

Is the facility address the same as the owner's mailing address

- ☒ Yes  
☐ No

Mailing Address

Mailing Town/City

Mailing State

Mailing Zip

Primary Contact (who should we call with questions)

Contact Phone

Other Email Address

Facility Information

Class

Utility

Other Utility Name

Date of Utility Signoff

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

60661

Facility Operator Name, if applicable

Panel Quantity

24

Panel Make

ET Solar

Panel Model

Other

Panel Rated Output

250

System capacity based on panels

6.0000

Inverter Quantity

1

Inverter Make

Solectria

Additional Inverter

Rated Output

5300

System capacity based on inverters

5.30

System capacity in mW as stated on the interconnection agreement

4.92

Revenue Grade Meter Make

Solectria

Was this facility installed directly by the customer (no electrician involved)?

- ☒ Yes  
☐ No

Date of Electrician Signoff

01/28/2013

Sign-off Electrician's License Number

Installation Company

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Independent Monitor Name

Paul Button

Monitor Company Name

Energy Audits Unlimited

Monitor Company Name

Monitor Company Name

Monitor Company Name

Other Monitor Company Name

Is the installer also the equipment vendor?

- ☒ Yes  
☐ No

Equipment Vendor

Please attach your completed interconnection agreement including Exhibit B.

[https://fs30.formsite.com/jan1947/files/f-5-99-5797788\\_vWYYIbYM\\_Meeh\\_Solar\\_SPIA.pdf](https://fs30.formsite.com/jan1947/files/f-5-99-5797788_vWYYIbYM_Meeh_Solar_SPIA.pdf)

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

[https://fs30.formsite.com/jan1947/files/f-5-168-5797788\\_j7jSSYAF\\_Meeh\\_NHOS.pdf](https://fs30.formsite.com/jan1947/files/f-5-168-5797788_j7jSSYAF_Meeh_NHOS.pdf)

Please attach additional document here

[https://fs30.formsite.com/jan1947/files/f-5-173-5797788\\_XetyWYVQ\\_Meeh\\_COC.pdf](https://fs30.formsite.com/jan1947/files/f-5-173-5797788_XetyWYVQ_Meeh_COC.pdf)

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.



Print Name

Linda Modica

Date Signed

01/02/2016

EXISTING NET METERING PROJECT NO. 250 WICKA WIND

11KW (WIND)

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA (Continued)

14KW  
Solar  
EXISTING

Simplified Process Interconnection Application and Service Agreement

Contact Information:

Date Prepared: 9-12-2012

Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate)

Customer or Company Name (print): JILL McCULLOUGH + TIM MEEH

Contact Person, if Company:

Mailing Address: 341 SHAKER ROAD

City: CANTERBURY

State: NH

Zip Code: 03224

Telephone (Daytime): 603-783-4712

(Evening): 603-496-1716 (CELL)

Facsimile Number: 603-783-4712

E-Mail Address: T-JM@COMCAST.NET

Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate):

Name: BOB DREW

Mailing Address: 104 BAPTIST RD

City: CANTERBURY

State: NH

Zip Code: 03224

Telephone (Daytime): 603-848-8303

(Evening):

Facsimile Number:

E-Mail Address: bobndrew@gmail.com

Electrical Contractor Contact Information (if appropriate):

Name:

Telephone:

Mailing Address:

City:

State:

Zip Code:

\* WE ARE AN EXISTING NET METERING CUSTOMER \*

Facility Information:

Address of Facility: 341 SHAKER RD

City: CANTERBURY

State: NH

Zip Code: 03224

Electric Service Company: PSNH Account Number: 56207990029 Meter Number: 560830315V

Electricity Supply Company: PSNH

Account Number: 5620799029

Generator/Inverter Manufacturer: FRONIUS

Model Name and Number: 16 PLUS 6.0 Quantity: 1

Nameplate Rating: 6.0 (kW) 6 (kVA) 240 (AC Volts) Single X or Three Phase

System Design Capacity: 4.92 (kVA) (kVA) Battery Backup: Yes No X

Net Metering: If Renewably Fueled, will the account be Net Metered? Yes X No

Prime Mover: Photovoltaic X Reciprocating Engine Fuel Cell Turbine Other

Energy Source: Solar X Wind Hydro Diesel Natural Gas Fuel Oil Other

UL 1741.1 (IEEE 1547.1) Listed? Yes X No External Manual Disconnect: Yes X No

Estimated Install Date: JAN 2013

Estimated In-Service Date: FEB 2013

Interconnecting Customer Signature

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the Terms and Conditions on the following page:

Customer Signature: Tim Meeh Title: OWNER Date: 9-12-2012

Please attach any documentation provided by the inverter manufacturer describing the inverter's UL 1741 listing.

Approval to Install Facility (For Company use only)

Installation of the Facility is approved contingent upon the terms and conditions of this Agreement, and agreement to any system modifications, if required (Are system modifications required? Yes No X To be Determined X)

Company Signature: Michael Meeh Title: SR. ENGINEER Date: 9-19-12

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA (Continued)

**Exhibit B - Certificate of Completion for Simplified Process Interconnections**

Installation Information:

Check if owner-installed

Customer or Company Name (print): Jill McCULLOUGH + TIM MEEH  
Contact Person, if Company: \_\_\_\_\_  
Mailing Address: 341 SHAKER ROAD  
City: CANTERBURY State: NH Zip Code: 03224  
Telephone (Daytime): 603-783-4712 (Evening): SAME  
Facsimile Number: \_\_\_\_\_ E-Mail Address: T-MEEH@COMCAST.NET

Address of Facility (if different from above): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Generation Vendor: \_\_\_\_\_

Contact Person: \_\_\_\_\_

I hereby certify that the system hardware is in compliance with Puc 900.

Vendor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Electrical Contractor's Name (if appropriate): BOB DREW  
Mailing Address: 104 BAPTIST RD  
City: CANTERBURY State: NH Zip Code: 03224  
Telephone (Daytime): 849-8305 (Evening): \_\_\_\_\_  
Facsimile Number: \_\_\_\_\_ E-Mail Address: bobndrew@bim312.com  
License number: 8300M

Date of approval to install Facility granted by the Company: 9-14-12 Installation Date: 1-14-13

Application ID number: \_\_\_\_\_

Inspection:

The system has been installed and inspected in compliance with the local Building/Electrical Code of

CANTERBURY NH  
(City/County)

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection): \_\_\_\_\_

Name (printed): Bob Drew Master NH 8300

Date: 1/28/13

Customer Certification:

I hereby certify that, to the best of my knowledge, all the information contained in this Interconnection Notice is true and correct. This system has been installed and shall be operated in compliance with applicable electrical standards. Also, the initial start up test required by Puc 905.04 has been successfully completed.

Customer Signature: Tim Meeh + Jill McCullough Date: 1-29-2012



## New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

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The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Timothy Meeh

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Printed Name of signature owner

*Timothy Meeh*

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Timothy Meeh (Nov 22, 2015)

Signature of system owner